

FORM 6 (ND/SD Miss. Dec. 2016)

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF MISSISSIPPI

In Re Jackson Water Cases, Plaintiff

v.

CIVIL ACTION No. 3:23-cv-00614-CWR-LGI

The City of Jackson, Mississippi, et al Defendant

APPLICATION FOR ADMISSION PRO HAC VICE

(A) Name: Raquel Lucas Herraiz
Firm Name: Butler Snow LLP
Office Address: 810 7th Avenue, Suite 1105
City: New York State New York Zip 10019
Telephone: (646) 588-1996 Fax: (646) 606-3995
E-Mail: Raquel.Lucas@butlersnow.com
(B) Client(s): Mississippi State Department of Health
Address: 570 Woodrow Wilson Drive
City: Jackson State MS Zip 39216
Telephone: (601) 576-7634 Fax: (601) 576-7530

The following information is optional:

Have you had a prior or continuing representation in other matters of one or more of the clients you propose to represent, and is there a relationship between those other matter(s) and the proceeding for which you seek admission?

Do you have any special experience, expertise, or other factor that you believe makes it particularly desirable that you be permitted to represent the client(s) you propose to represent in this case?

(C) I am admitted to practice in the:



State of New York



District of Columbia

and I am currently in good standing with that Court. A certificate to that effect, issued by the appropriate licensing authority within ninety days of the date of this Application, is enclosed; the physical address, telephone number and website/email address for that admitting Court are:

Supreme Court of the State of New York
Appellate Division, Third Department
P.O. Box 7350
Capitol Station
Albany, New York 12224

All other courts before which I have been admitted to practice:

Jurisdiction

Period of Admission

U.S. District Court, Southern District of New York
 U.S. District Court, Eastern District of New York
 State of Texas (Certificates of Good Standing attached)

5/18/2021-Present
 5/18/2021-Present
 12/1/2022-Present

- | | Yes | No |
|--|-----------------------|----------------------------------|
| (D) Have you been denied admission pro hac vice in this state? | <input type="radio"/> | <input checked="" type="radio"/> |
| Have you had admission pro hac vice revoked in this state? | <input type="radio"/> | <input checked="" type="radio"/> |
| Has Applicant been formally disciplined or sanctioned by any court in this state in the last five years? | <input type="radio"/> | <input checked="" type="radio"/> |

If the answer was "yes," describe, as to each such proceeding, the nature of the allegations, the name of the person or authority bringing such proceedings; the dates the proceedings were initiated and finally concluded; the style of the proceedings; and the findings made and actions taken in connection with those proceedings:

N/A

- | | Yes | No |
|---|-----------------------|----------------------------------|
| (E) Has any formal, written disciplinary proceeding ever been brought against you by a disciplinary authority in any other jurisdiction within the last five years? | <input type="radio"/> | <input checked="" type="radio"/> |

If the answer was “yes,” describe, as to each such proceeding, the nature of the allegations; the name of the person or authority bringing such proceedings; the date the proceedings were initiated and finally concluded; the style of the proceedings; and the findings made and actions taken in connection with those proceedings.

N/A

- | | | | |
|-----|--|-----------------------|----------------------------------|
| | | Yes | No |
| (F) | Have you been formally held in contempt or otherwise sanctioned by any court in a written order in the last five years for disobeying its rules or orders? | <input type="radio"/> | <input checked="" type="radio"/> |

If the answer was “yes,” describe, as to each such order, the nature of the allegations, the name of the court before which such proceedings were conducted; the date of the contempt order or sanction, the caption of the proceedings, and the substances of the court’s rulings (a copy of the written order or transcript of the oral rulings must be attached to the application).

N/A

- (G) Please identify each proceeding in which you have filed an application to proceed pro hac vice in this state within the preceding two years, as follows:

Name and Address of Court	Date of Application	Outcome of Application
N/A	N/A	N/A

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- (H) Please identify each case in which you have appeared as counsel pro hac vice in this state within the immediately preceding twelve months, are presently appearing as counsel pro hac vice, or have pending applications for admission to appear pro hac vice, as follows:

Name and Address of Court	Style of Case
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N/A

N/A

- (I) Have you read and become familiar with all the LOCAL UNIFORM CIVIL RULES OF THE UNITED STATES DISTRICT COURTS FOR THE NORTHERN AND SOUTHERN DISTRICTS OF MISSISSIPPI?

Yes

No



Have you read and become familiar with the MISSISSIPPI RULES OF PROFESSIONAL CONDUCT?



- (J) Please provide the following information about the resident attorney who has been associated for this case:

Name and Bar Number Meade W. Mitchell, MB #9649

Firm Name: Butler Snow LLP

Office Address: 1020 Highland Colony Parkway, Suite 1400

City: Ridgeland

State: MS

Zip: 39157

Telephone: (601) 985-4560

Fax: (601) 985-4500

Email address: Meade.Mitchell@butlersnow.com

- (K) The undersigned resident attorney certifies that he/she agrees to the association with Applicant in this matter and to the appearance as attorney of record with Applicant.

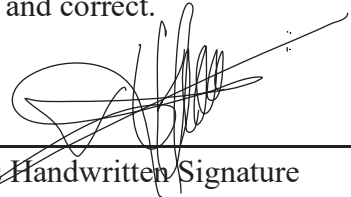


Resident Attorney

I certify that the information provided in this Application is true and correct.

1/16/2025

Date



Applicant's Handwritten Signature

Unless exempted by Local Rule 83.1(d)(5), the application fee established by this Court must be enclosed with this Application.

CERTIFICATE OF SERVICE

The undersigned Resident Attorney certifies that a copy of this Application for Admission Pro Hac Vice has been mailed or otherwise served on this date on all parties who have appeared in this case.

This the 16th day of January, 2025.



Resident Attorney